DECLARATION/ POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
With Initial
Filing

\boxtimes	Declaration
	Submitted after Initia
	Filing (surcharge
	(37 CFR 1.16 (e))
	required)

Attorney Docket Number:	3SI-138US			
First Named Inventor:	Joel Bartholf			
СОМ	PLETE IF KNOWN			
Application Number:	10/659,082			
Filing Date:	September 10, 2003			
Art Unit:				
Examiner Name:				

I hereby declare that:					
Each inventor's residence, mailing a	address, and citizenship are a	as stated below next to the	neir name.		
I believe the inventor(s) named belo sought on the invention entitled:	w to be the original and first in	nventor(s) of the subject	matter which is claimed	and for which a patent is	
SHIPPING DEVICE AND METHOD FOR ARTICLES CAPABLE OF RELEASING GAS CONTAINING HAZARDOUS PARTICULATES					
	(Tit	le of the Invention)			
the specification of which	(***				
is attached hereto					
. OR					
was filed on (MM/DD/YYYY) 09/10/03 as United States Application or PCT International Application Number 10/659,082					
and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Country Foreign Filing Date Number(s) Foreign Filing Date (MM/DD/YYYY) Claimed Yes No					

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached? No

Declaration/Power Of Attorney for Utility or Design Patent Application (continued)

I hereby appoint:	. 24244				
Practitioners at Customer Nu	mber <u>31344</u>				
OR Practitioner(s) named below:					
Name			Regis	stration Number	
as my/our attorney(s) or agent(s) to pro Patent and Trademark Office connected t		dentified above, and t	to transact a	Il business in the United St	ates
Direct all correspondence to:	Practitioners Customer N	Jumber listed above:	OR .		
	orrespondence Address				
		Below			
Name: RatnerPrestia					
Address: P. O. Box 1596					.,
City: Wilmington Sta	State: Delaware Zip: 19899				
Country: USA Te	Telephone: (302) 778-2500 Fax: (302) 778-2600				
I hereby declare that all statements made belief are believed to be true; and further like so made are punishable by fine or imp jeopardize the validity of the application of	that these statements we prisonment, or both, und	ere made with the kno ler 18 U.S.C. 1001 an	owledge that	willful false statements and	
			61. 1.6		.
Name of Sole or First Invento	☐ A Petition has been filed for this unsigned inventor.				
Given Name (first and middle	Family Name or Surname				
Joel			Ваі	Bartholf	
Inventor's Signature	Bullott			Date:///9/03	
Residence: City: Macon	State: Georgia	Country: USA		Citizenship: USA	
Mailing Address:					
Mailing Address: 3549 Westhaven Drive	2			·	
City: Macon	City: Macon State: GA Zip: 31206 Country: USA				
Additional inventors are listed on	the next page.				

Declaration/Power Of Attorney for Utility or Design Patent Application (continued)

Name of Sec nd Invent r:		A Petition has been filed for this unsigned inventor.		
Given Name (first and middle (if any))		Family Name or Surname		
Dennis		Ruth		
Inventor's Signature	nniv Rux	4	Date:	
Residence: City: Macon	State: Georgia	Country: USA Citizenship: USA		
Mailing Address:				
Mailing Address: 161 Cambridge Way				
City: Macon	State: GA	Zip: 31220	Country: USA	
Name of Third Inventor:		A Petition has been filed for this unsigned inventor.		
Given Name (first and middle	(if any))	Family Name or Surname		
Inventor's Signature		Date:		
Residence: City:	State:	Country: Citizenship:		
Mailing Address:				
Mailing Address:				
City:	State:	Zip:	Country:	
Name of Fourth Inventor:		A Petition has been filed for this unsigned inventor.		
Given Name (first and middle (if any))		Family Name or Surname		
Inventor's Signature			Date:	
Residence: City:	State:	Country: Citizenship:		
Mailing Address:				
Mailing Address:				
City:	State:	Zip:	Country:	
Additional inventors are listed on Supplemental Sheet(s).				